

**KANSAS WING DEPOSIT ADVICE
FOR UNITS BELOW WING LEVEL**

DATE:

DATE OF DEPOSIT:

UNIT NAME:

CHARTER #: NCR-KS-

******LIST EACH ITEM INCLUDED IN DEPOSIT******

ITEM	RECEIVED FROM	PURPOSE OR COA NUMBER	CHECK # OR CASH	AMOUNT
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
TOTAL AMOUNT OF DEPOSIT				\$ -

REMARKS:

Verification of UNIT CC or FINANCE OFFICER

PRINT NAME:

SIGNATURE:

DATE: